


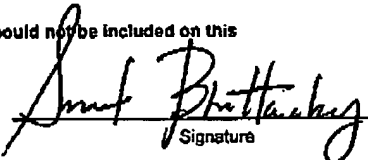
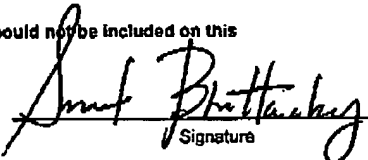
MAR 11 2005

PTO/SB/31 (08-03)

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NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES		Docket Number (Optional) 220777086					
I hereby certify that this paper is being facsimile transmitted to the U.S. Patent and Trademark Office, Fax No. (703) 872-9306 on <u>March 11, 2005</u> . Signature <u></u> Typed or printed name <u>Thea Wagner</u>		In re Application of Stephen J. JOURDAN et al. <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 2px;">Application Number 09/750,150</td> <td style="width: 50%; padding: 2px;">Filed December 29, 2000</td> </tr> </table> For MULTI-MODE NON-BINARY PREDICTOR <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 2px;">Art Unit 2183</td> <td style="width: 50%; padding: 2px;">Examiner Tonia L. MEONSKE</td> </tr> </table>		Application Number 09/750,150	Filed December 29, 2000	Art Unit 2183	Examiner Tonia L. MEONSKE
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Applicant hereby appeals to the Board of Patent Appeals and Interferences from the decision of the examiner. The fee for this Notice of Appeal is (37 CFR 1.17(b)) \$ <u>500.00</u> <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: \$ _____ <input type="checkbox"/> A check in the amount of the fee is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. <u>11-0600</u> . I have enclosed a duplicate copy of this sheet. <input checked="" type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. I am the <input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) <input checked="" type="checkbox"/> attorney or agent of record. Registration number <u>51,469</u> <input type="checkbox"/> attorney or agent acting under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) _____							
<div style="text-align: right; padding-right: 20px;">  Signature Sumit Bhattacharya Typed or printed name (408) 975-7500 Telephone number March 11, 2005 Date </div>		<div style="text-align: right; padding-right: 20px;">  Signature Sumit Bhattacharya Typed or printed name (408) 975-7500 Telephone number March 11, 2005 Date </div>					
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.							

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